

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jennifer Mullis  
 P O Box 31356  
 Cincinnati, OH 45231

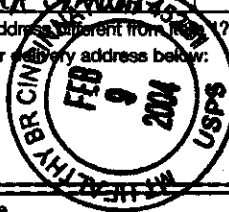
COMPLETE THIS SECTION ON DELIVERY

A. Signature  
 X *Jennifer L. Mullis* ☐ Agent ☐ Addressee

B. Received by (Printed Name)  
*JENNIFER L. MULLIS*

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☐ No  
 If YES, enter delivery address below:



3. Service Type  
☐ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Indicates from service below)

7003 0500 0002 0889 9605

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540